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NEWTON ABBOT URBAN DISTRICT COUNCIL.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH - 1948.

MR. CHAIRMAN AND COUNCILLORS,

I beg to submit my Annual Report for the year 1948.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres)	4,132.
Population - 1931 Census	15,010.
Population - Mid. 1948	16,150.
Number of Inhabited Houses	4,459.
Rateable Value as at 1st. Jan. 1948	£137.117.
Rateable Value as at 31st. Dec. 1948	£123.219.
Product of a ld. rate (as at 1st April 1948)	£501. 15.

VITAL STATISTICS.

BIRTHS:

The following table shows that the Birth Rate for the District is slightly below that for England and Wales as a whole. Also a decrease on the past two years, the figures being 16.34 for 1948, 17.39 for 1947 and 17.26 for 1946.

<u>LIVE BIRTHS:</u>	<u>MALE:</u>	<u>FEMALE:</u>	<u>TOTAL:</u>
Legitimate.	128	122	250
Illegitimate.	7	7	14

135	129	264
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Live Birth Rate per 1,000 total population	16.34
Corresponding Rate for England and Wales	17.9

<u>STILL BIRTHS:</u>	<u>MALE:</u>	<u>FEMALE:</u>	<u>TOTAL:</u>
Legitimate.	-	4	4
Illegitimate.	-	-	-

-	4	4
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Still Birth Rate per 1,000 births (live and still)	14.9
Still Birth Rate per 1,000 births (live and (England and Wales) still)	23.0
Still Birth Rate per 1,000 total population	0.24



VITAL STATISTICS:

<u>DEATHS:</u>	<u>MALE:</u>	<u>FEMALE:</u>	<u>TOTAL:</u>
	107	108	215.

Death Rate per 1.000 population. 13.4.
 Death Rate (England and Wales)
 per 1.000 population. 10.8.

<u>AGE AT DEATH:</u>	<u>MALE:</u>	<u>FEMALE:</u>	<u>TOTAL:</u>
Infants under 1 year	4	1	5
1 - 5	2	2	4
5 - 15	-	-	-
15 - 25	1	-	1
25 - 35	4	2	6
35 - 45	3	5	8
45 - 55	16	4	20
55 - 65	17	12	29
65 - 75	23	34	57
75 and over	37	48	85
	107	108	215

MATERNAL MORTALITY: (Childbirth) 2 = a rate of 7.4 per
 1.000 total births.

<u>INFANTILE MORTALITY:</u>	<u>MALE:</u>	<u>FEMALE:</u>	<u>TOTAL:</u>
Legitimate.	4	1	5
Illegitimate.	-	-	-
	4	1	5

The Infantile Mortality Rate (i.e. Deaths of
 Infants under one year) per 1.000 live births. 18.1.
 Corresponding Rate for England and Wales. 34.0.

The Infantile Mortality rate for this district compares
 very favourably with the figure for England and Wales and shows
 a considerable improvement on 1947 when the figure was 30.08.

Natural Increase of population (excess of Births over
 Deaths) = 24.

Average age at Death = 67.8 years.

DEATHS:

CAUSES OF DEATH.

Causes of Death in 1948, as supplied by the Registrar

	General.	M.	F.
All Causes		107	108
<u>Infectious Causes:</u>			
Pulmonary Tuberculosis		6	3
Other Tuberculosis		-	1
Influenza		1	-
Pneumonia		3	2
<u>Other Causes:</u>			
Heart and Blood Vessels		30	48
Cerebral Haemorrhage		18	12
Cancer		16	16
Bronchitis		6	4
Nephritis		1	2
Suicide		1	1
Diabetes		1	1
Ulcers		3	-
Congenital Malformation		1	-
Road Traffic Accidents		1	-
Premature Birth		2	-
Child Birth		-	2
Syphilitic Disease		-	1
Violent Causes		5	3
Digestive Diseases		1	1
All other Causes		11	11

INFECTIOUS DISEASES:

Again a satisfactory year can be reported under this heading.

<u>DISEASE:</u>	<u>CASES:</u>	<u>SENT TO HOSPITAL:</u>	<u>DEATHS:</u>
Scarlet Fever.	5	2	-
Diphtheria.	1	1	-
Pneumonia.	1	1	-
Erysipelas.	1	-	-
Malaria.	3	-	-
Acute Anterior Poliomyelitis.	1	1	-

SCARLET FEVER:- The ages of the patients were:- 10 years, 7, 6, 3, and 1½ years.

INFECTIOUS DISEASES:

DIPHTHERIA:- The patient was aged 26 years and came from the Kirknewton Nursing Home, Newton Abbot.

MALARIA:- These cases were reported from the Stover Park Hostel for Polish Displaced Persons.

ACUTE ANTERIOR POLIOMYELITIS:- I am glad to report that there was one case only this year, a Male (Mr. R. A. Love) aged 22 years who was a student at the Seale Hayne Agricultural College Newton Abbot.

TUBERCULOSIS:- Thirty cases were notified during the year, 21 Male and 9 Female, of which 27 were Pulmonary cases and 3 Non-Pulmonary, the details are set out in the following table:-

	<u>AGE PERIODS:</u>		<u>NEW CASES:</u>				<u>DEATHS:</u>			
			<u>Pulmonary.</u>		<u>Non-Pulmonary.</u>		<u>Pulmonary.</u>		<u>Non-Pulmonary.</u>	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0								
1			1	1				1
5								
15	3	2						
25	8	3	1	2	1			
35	5	3		2	1			
45	2			1				
55	1							
65	and upwards					1	1			
			19	8	2	1	6	3		1

DIPHTHERIA IMMUNISATION:

On July 5th 1948 the Devon County Council assumed responsibility for Diphtheria Immunisation. From 1st. January to the 4th July 1948 all immunisation in the Urban District was done by the Medical Officer of Health. Sessions are still held at various School and Maternity and Child Welfare Clinics in the District, but this Service is now the entire responsibility of the County Council.

NATIONAL ASSISTANCE ACT, 1948.

No action has been taken during the year under Section 47 of the National Assistance Act, 1948 which deals with the compulsory removal of persons incapable of looking after themselves.



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WATER SUPPLY:

The water supply in the Urban District is obtained from the Torquay Corporation and is excellent, both in quantity and quality.

Both chemical and bacteriological examinations have been made of the raw and treated water. The whole of the supply is filtered and owing to its soft character is hardened with lime and chlorinated. The raw water, normally acid with a pH value of 6.8, after treatment is raised to 9.2 which results in the consumers receiving a water with a pH value of approximately 7.5.

The chlorine dosage varies from 0.5 to 0.75 parts per million, which gives a residual of 0.25 to 0.5 parts per million.

Comprehensive analyses of the raw water numbered 2, bacteriological and chemical, as follows:-

REPORTS BY THE COUNTIES PUBLIC HEALTH LABORATORIES.

(THRESH, BEALE AND SUCKLING)

66, Victoria Street, London, S.W. 1.

2. Sample 27.4.48. TRENCHFORD RESERVOIR (Untreated).

CHEMICAL RESULTS IN PARTS PER MILLION.

Appearance :- Bright with a very slight flocculent deposit of mineral and organic debris. A few diatoms and many protozoa present.

Colour (Hazen) :		Turbidity (Silica Scale);	Less
Slight Yellow-brown ...	19		than 5
Reaction pH on the Acid		Odour	Nil
side of Neutrality ...	6.6	Free Carbon Dioxide	Trace
Electric conductivity at		Total solids, dried	
20 degrees C.	75	at 180 degrees C.	60
Chlorine in Chlorides ...	12	Alkalinity as Calcium	
Hardness: Total ...	25	Carbonate	5
Nitrogen in Nitrates ...	1.2	(Carbonate (Non-Carbonate	
Free Ammonia ...	0.044	(temporary 5 (permanent	20
Uminoid Ammonia ...	0.078	Nitrogen in Nitrites	Absent
Oxygen absorbed in 4		Residual Chlorine	-
hours at 27 Degrees C ..	1.1		
Totals: Iron ...	0.04		
Other Metals ..	Absent		

WATER SUPPLY:

BACTERIOLOGICAL RESULTS.

(Bacteriological sampling bottles are treated to remove residual chlorine if this is present at the sampling time.-)

Number of Bacteria grow-
ing on Agar per c.c. or) 1 day @ 37.C 2 days @ 37.C 3 days @ 20.C
ml. in ...) 310. 400. 46.

Presumptive Coliform Reaction	Present in -.	Absent from 100 ml.
Bact. coli ...	Present in -.	Absent from 100 ml.
Cl. welchii Reaction ...	Present in -.	Absent from 100 ml.

This sample is practically clear and bright in appearance, since it carries only a trace of matter in suspension. The water is faintly acid in reaction, very soft in character, and deficient in alkalinity. It has a comparatively low content of mineral constituents in solution, and it is free from metals apart from a negligible trace of iron. It shows noticeable but not marked colour, and is of satisfactory organic quality. The bacterial impurity is considerable, but in the absence of organisms of excremental origin there is no evidence of dangerous contamination.

The water is considered readily amenable to treatment for the production of a public supply.

2. Sample 27.4.48. FERNWORTHY SUPPLY AT TRENCHFORD.

OUTLET GAUGE (UNTREATED)

CHEMICAL RESULTS IN PARTS PER MILLION.

Appearance:- Very faintly opalescent with a slight flocculent deposit of mineral and organic debris
Many diatoms and protozoa present.

Colour (Hazen) :		Turbidity (Silica Scale);	Less
Yellow-brown ...	35		than 5
Reaction pH neutral ...	7.0	Odour ...	Nil
Electric conductivity		Free Carbon Dioxide ...	Trace
at 20 degrees C. ...	50	Total solids dried	
Chlorine in Chlorides ..	9	at 180 degrees C.	45
Hardness: Total ..	25	Alkalinity as Calcium	
Nitrogen in Nitrates ...	0.0	Carbonate ...	4
Free Ammonia ...	0.040	(Carbonate (Non-Carbonate	
Albuminoid Ammonia ...	0.160	(temporary 4 (permanent	21
Oxygen absorbed in 4		Nitrogen in Nitrites	Absent
hrs. at 27 degrees C.	1.8	Residual Chlorine	-
Metals: Iron ...	0.18		
Manganese ...	0.03		
Other Metals	Absent		

WATER SUPPLY:

BACTERIOLOGICAL RESULTS.

(Bacteriological sampling bottles are treated to remove residual chlorine if this is present at the time of sampling.)

Number of Bacteria grow-) ing on Agar per c.c.) or ml. in ...)	1 day @ 37.C	2 days @ 37.C	3 days at 20.C
	600	850	130
Presumptive Coliform Reaction	Present in 20 ml.	Absent from 10 ml	
Bact. coli (Type 1.) ...	Present in 20 ml.	Absent from 10 ml	
Cl. welchii Reaction ...	Present in -.	Absent from 100 ml	

This sample shows only faint opalescence and carries only a trace of matter in suspension. The water is neutral in reaction but it is very soft in character and has a low content of alkalinity. The amount of mineral constituents in solution is, similarly, very small. The water is free from metals apart from minute traces of iron and manganese. It shows very distinct though not pronounced colour, and it is of satisfactory organic quality for an untreated supply. The bacterial impurity shown is indicative of very slight contamination by matters of excremental origin, since Bact. coli are present in appreciable numbers. The water is considered readily amenable to treatment for the production of a public supply.

SEWERAGE:

No new works of sewerage or sewage disposal have been undertaken during 1948.

MEAT AND OTHER FOODS:

The Public Abattoir is still occupied by the Ministry of Food and killing is carried out there for the following districts:- Newton Abbot Urban District Council; Newton Abbot Rural District Council; and Ashburton, Buckfastleigh and Teignmouth Urban District Councils.

The food shops and catering establishments in the town have been visited from time to time and conditions were found to be generally satisfactory.

HOUSING:

Overcrowding is still prevalent throughout the area. Although the Urban District Council has done its best, so far as it has been allowed, to provide new houses; the supply seems to be no nearer overtaking the demand. Until a more substantial contribution to the solution of the housing problem has been reached, the Council cannot turn its attention to the demolition of insanitary houses, of which far too many still remain. Other factors contributing to the housing shortage are the difficulty in effecting repairs to defective but repairable houses that are in danger of falling into decay, the reluctance of owners to spend money on houses with restricted uneconomic rents, and by the shortage of essential materials.

W. A. Brown

MEDICAL OFFICER OF HEALTH.

